## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
•			10/
FEE DETERMINATION	14		10/8
O.I.P.E. CLASSIFIER	Sol	32	1013
FORMALITY REVIEW		69652	11/15/10
RESPONSE FORMALITY REVIEW		19/11/1	(/3,/6)
		70 , 70	1 2011/01

## **INDEX OF CLAIMS**

~	Rejected	N	Non-elected
=	Allowed	l l	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

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Claim Date	Claim	Date Cla	aim Date						
Final Trust of State	Final Criginal Conginal Congina Conginal Conginal Conginal Congina Congina Congina Congina Co	Final	Original						
	52  /		102						
A VD	53 /		103						
	55 1 7	<del> }                                    </del>	106						
6			106						
7 8			107						
9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(59)		109						
10			110						
11			112						
13 100	<b>7</b>		113						
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15	66	<del>\/                                    </del>	116						
17	0		117						
19 J	69		118						
	<u> </u>		120						
21	71		121						
22	23		122						
24	74		124						
25 26	75		125						
	1 77	<del></del>	127						
28	78		128						
29 \	79		130						
31	81		131						
32 33	82	<del>                                     </del>	132						
33	84		134						
35	85		135						
36 37	86	┼┼┼┼┤┞╴	137						
38 /	88		138						
40 75	90	<del>                                     </del>	140						
3. 41 D	91		141						
42 \   \	92		142						
43	93		1144						
45	95		145						
46	96 97	<del>                                     </del>	147						
47 / 0 / 0 / 48 / / / / / / / / / / / / / / / / /	97		148						
49 / / 3	99		149						
50 4 7 3 3 7	100		1190 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						

If more than 150 claims or 10 actions staple additional sheet here

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